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| SERIAL NUMBER 09/448,940 | FILING DATE 11/24/99 | CLASS 382 | GROUP ART UNIT 2721 2624 | ATTORNEY DOCKET NO. GEM:0071/15- |
|-----------------------------|-------------------------|--------------|--------------------------------|-------------------------------------|

APPLICANT: ROBERT D. BARNES, PALATINE, IL; ROBERT C. GEMPERLINE, ALGONQUIN, IL.

CONTINUING DOMESTIC DATA***

VERIFIED

AD

371 (NAT'L STAGE) DATA***

VERIFIED

AD

FOREIGN APPLICATIONS***

VERIFIED

AD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/04/00

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|---------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY IL | SHEETS DRAWING 8 | TOTAL CLAIMS 27 | INDEPENDENT CLAIMS 4 |
| Verified and Acknowledged <i>AD</i> Examiner's Initials | | | Initials | | | |

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| ADDRESS | PATRICK S YODER FLETCHER YODER & VAN SOMEREN P O BOX 692289 HOUSTON TX 77269-2289 |
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| TITLE | IMAGE DATA COMPRESSION EMPLOYING MULTIPLE COMPRESSION CODE TABLES |
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|------------------------------|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE RECEIVED \$964 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|